



STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591971

REPORT NO. **E256069**

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1 1 2 31
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1 1 2 32
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FROM TO
3 5 33
FROM TO
7 3 34
4 35
4 36
37
38
39
40
1 41
1 42

INTERSTATE <input type="checkbox"/>	CITY STREET <input checked="" type="checkbox"/>	FIRE RESULTED <input type="checkbox"/>
STATE ROUTE <input type="checkbox"/>	OTHER <input type="checkbox"/>	STOLEN VEHICLE <input type="checkbox"/>
COUNTY RD <input type="checkbox"/>	PRIVATE WAY <input type="checkbox"/>	HIT & RUN INVOLVED <input type="checkbox"/>

TRIBAL RESERVATION

CASE #	13-01682
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LOCAL AGENCY CODING

TOTAL # OF UNITS	02	OBJECT STRUCK
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DATE OF COLLISION	07 - 11 - 2013	TIME (2400)	2355	COUNTY #	31	MILES		N	E	IN	OF	0664
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ON (PRIMARY TRAFFIC WAY) INTERSECTION ☒ NON-INTERSECTION ☐

MARKET PLACE NE	BLOCK NO.	9100
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DISTANCE		MILES	N	E	OF (REFERENCE OR CROSS STREET)	91ST AVE NE
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UNIT 01	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE
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LAST NAME	CARVALHO	FIRST NAME	MELEIHA	MIDDLE INITIAL	A
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STREET NEW ADDRESS	24906 48TH AVE NW
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CITY	STANWOOD	ST	WA	ZIP	982929328
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	CARVAMA1120M	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	09	14	1989
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ON DUTY	STATUS	AIRBAG	3	RESTR	4	EJECT	1	HELMET USE	2	INJURY CLASS	7	NATURE OF INJURIES	SORE NECK AND SHOULDER
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LICENSE PLATE #	ADN7744	STATE	WA	VIN#	1FAHP3GN5BW198159
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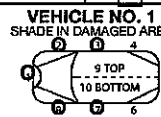
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2011	MAKE	FORD	MODEL	FOCUS	STYLE	4D	VEHICLE TOWED	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	MACK'S TOWING	GOVT. VEHICLE	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. ROBERT LARSON 12330 HILLTOP RD ARLINGTON WA 98223

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	AMERICAN INSURE ALL CCCIZA6302884-04
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VEHICLE LEGALLY STANDING	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CITATION #	3Z0546286	CHARGE	FAIL TO YIELD LEFT TURN
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UNIT 02	MOTOR VEHICLE <input checked="" type="checkbox"/>	PEDAL CYCLE <input type="checkbox"/>	PEDESTRIAN <input type="checkbox"/>	PROPERTY OWNER <input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE
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LAST NAME	HOLMES	FIRST NAME	KATHRYN	MIDDLE INITIAL	M
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STREET NEW ADDRESS	3528 95TH DR SE
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CITY	LAKE STEVENS	ST	WA	ZIP	982585616
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CDL	RESTRICTIONS	ENDORSEMENTS
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DRIVER'S LICENSE #	HOLMEKM26105	STATE	WA	SEX	F	D.O.B.	MMDDYYYY	09	25	1974
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ON DUTY	STATUS	AIRBAG	2	RESTR	4	EJECT	1	HELMET USE	2	INJURY CLASS	7	NATURE OF INJURIES	SORE NECK
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LICENSE PLATE #	B48766P	STATE	WA	VIN#	5TBBT441X3S430980
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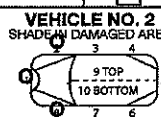
TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	2003	MAKE	TOYT	MODEL	PU	STYLE		VEHICLE TOWED	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	TOWED BY		GOVT. VEHICLE	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO. KATHRYN HOLMES 3528 95TH DR SE LAKE STEVENS WA 98258

LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	ALLSTATE 9 76 404130
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VEHICLE LEGALLY STANDING	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	CITATION #		CHARGE	
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OFFICER'S NAME (PRINT)	W. AUKERMAN	BADGE OR ID #	72	AGENCY	WA0311900
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STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E256069**

CASE # **13-01682**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)											
NAME (LAST, FIRST, MIDDLE INITIAL)											
ADDRESS & PHONE #		SEX		D.O.B. MM/DD/YYYY							
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #	SEAT POS	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES		
NAME (LAST, FIRST, MIDDLE INITIAL)											
ADDRESS & PHONE #		SEX		D.O.B. MM/DD/YYYY							
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #	SEAT POS	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES		
NAME (LAST, FIRST, MIDDLE INITIAL)											
ADDRESS & PHONE #		SEX		D.O.B. MM/DD/YYYY							
PASSENGER <input type="checkbox"/>	WITNESS <input type="checkbox"/>	UNIT #	SEAT POS	AIRBAG	RESTR.	EJECT	HELMET USE	INJURY CLASS	NATURE OF INJURIES		

NARRATIVE

On 07/11/2013 at about 2356 hours (all times approximate) I was radio dispatched to a two vehicle collision with possible injuries at the intersection of Market Place NE and 91st Ave NE in the city of Lake Stevens.

Arriving on scene I contacted both drivers involved. Based on evidence and statements at the scene it is found that U1 had been traveling westbound on Market Place NE and proceeded into the traffic light controlled intersection of 91st Ave NE while facing a circular green light, making a left turn onto southbound 91st Ave. U2 at this time was traveling eastbound on Market Place and entered the intersection of 91st Ave NE while also facing a green light. U1 failed to yield the right of way to U2 by making a left turn into the path of U2 which had the right of way which resulted in the collision.

After the impact between U1 and U2, U1 proceeded northeast bound (backwards) out of the intersection and came to final rest partially on the sidewalk located at the northeast corner of the intersection. The front airbags in U1 deployed. The driver of U1 was wearing her seatbelt and complained of a sore left shoulder/lower neck due to the seatbelt. The driver of U2 stated she was wearing her seatbelt and complained of a sore neck. Both drivers were seen by aid personnel at the scene and refused further medical assistance at the scene.

U1 was unable to be moved from its final resting spot under its own power and had to be towed from the scene. Mack's Towing arrived on scene and removed U1.

U2 was driven off the roadway under its own power and parked in the Albertson's parking lot a short distance away.

I took several digital images of the scene and vehicles. I later transferred the digital images onto a CD -R and secured the CD-R as evidence at the Lake Stevens Police Dept.

The driver of U1 was cited for failing to yield the right of way when turning left which resulted in the collision.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

W. AUKERMAN

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

07-12-13 02:59 AM

DATED

PLACE SIGNED

APPROVED BY

JULIE JAMISON 097

DATE

7/12/2013 3:47:48 AM

BADGE OR ID #

72

ORI #

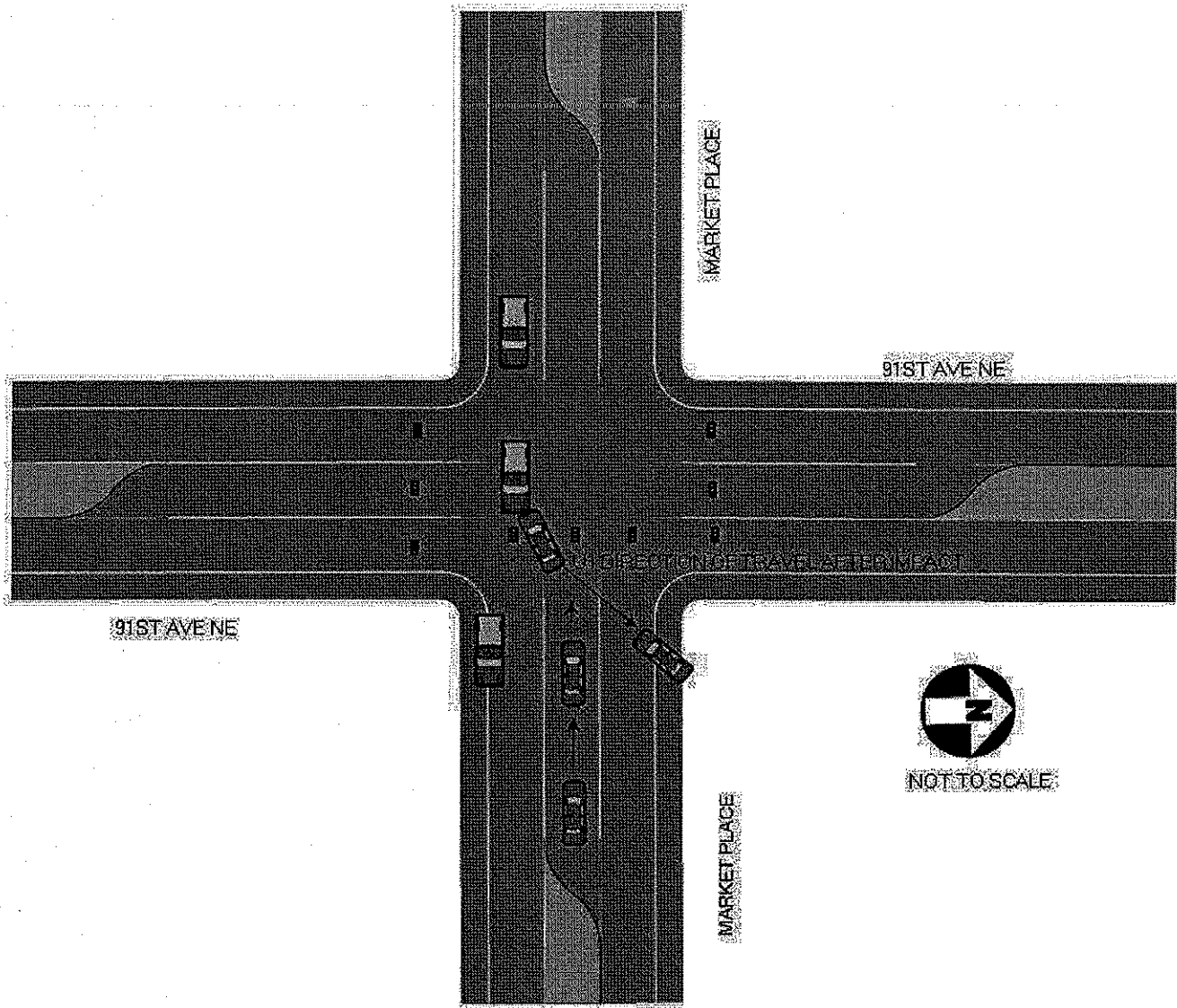
WA0311900

TIME POLICE DISPATCHED

11:56 PM

TIME POLICE ARRIVED

11:58 PM



Incident History for: #SS13015561 Xref: #AG13001961

Case Numbers: \$SS13001682

Entered 07/11/13 23:55:54 BY SPDF25 SP0294
Dispatched 07/11/13 23:56:30 BY SPDP17 SP0356
Enroute 07/11/13 23:56:30
Onscene 07/11/13 23:58:30
Closed 07/12/13 00:41:25

Initial Type: ACC Initial Alarm Level: Final Alarm Level:
Final Type: ACC (ACCIDENT, NON-INJURY OR UNKNOWN) Pri: 2 Dispo: H
Police BLK: SS002 Fire BLK: AG1518 Map Page: 397E-1 Group: SS1 Beat: WEST

Src: T

Loc: 91 AV NE/MARKET PL , LKS (V)

Loc Info:

Name: HOLMES, KATHRYN Addr: Phone: 4253594171

/2355 (SP0294) ENTRY , PC VS TRUCK , AT INTERSECTION. UNK INJ, BLKING
/2356 CROSS #AG13001961
/2356 (SP0356) AGCADV , 1914
/2356 (SP0375) SUPP NAM: HOLMES, KATHRYN,
PHO: 4253594171,
TXT: CC, NOW, NON INJ, BLKING, GRY TOYT TUNDRA V
SIL PC
/2356 (SP0356) DISPER SS1914 #SS97 JAMISON, SGT (JULIE)
/2356 ASSTER SS1940 #SS120 BERNHARD, OFFICER (KERRY)
/2357 (SP0355) SUPP TXT: OUR RP INVOLVED STATED ALL OUT WALKING AROU
ND, MINOR INJS, DIDN'T THINK IT REQ'D AID
/2357 (SP0294) SUPP NAM: ARMOS, SHERI,
PHO: 4257894390,
TXT: FEM KEEPS SAYING 'OWE', NOT CLOSE ENOUGH TO
GET ANY FURTHER, BUT RP BELIEVES THERE ARE SOME
INJS, BAL T/MVC

/2358 (SP0356) ONSCNE SS1940
/2359 ASSTER SS1930 [91 AV NE/MARKET PL , LKS]
#SS72 AUKERMAN, OFFICER (WAYNE)
/2359 SUPP TXT: CHEST PX, AIRBAG DEPLYMNET

*** New Date: 07/12/13 ***

/0000 CLEAR SS1914
/0000 ONSCNE SS1930
/0004 ASNCAS SS1930 \$SS13001682
/0004 ROTREQ SS1930 TOW 5099 LKS MACK'S TOWING
3605683131
/0005 MISC SS1930 , MACKS ENRT
/0011 (SS120) REMINQ SS1940 MDTVEH, ADN7744, , WA, , , , , , , , , ,
/0014 (SS72) *MISC SS1930 , U2 ALLSTATE # 9 76 404130 U1 AMERICAN INSURE AL
L AGENCY INS
/0015 REMINQ SS1930 MDTWANT, HOLMES, KATHRYN, M, 092574, , , WA, , , , , , , , , ,
/0015 REMINQ SS1930 MDTVEH, B48766P, , WA, , , , , , , , , ,
/0016 REMINQ SS1930 MDTVEH, ADN7744, , WA, , , , , , , , , ,
/0017 REMINQ SS1930 MDTWANT, CARVALHO, MELEIHA, A, 091489, , , WA, , , , , , , , , ,
/0022 (SP0356) MISC SS1940 , TOW OS
/0022 (SS72) *MISC SS1930 , TOW ONSCENE
/0041 (SP0356) CLEAR SS1930 D/H
/0041 CLEAR SS1940 D/H
/0041 CLOSE SS1940